## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000044139

Entity Name: ATLAS AVIATION TAMPA, INC.

FILED Feb 21, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

825 SEVERN AVENUE TAMPA, FL 33606 US

Current Mailing Address: New Mailing Address:

5727 BISCAYNE CT 309 4772 TUSCAN LOON DRIVE NEW PORT RICHEY, FL 34652 US TAMPA, FL 33619 US

FEI Number: 20-0855111 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DYMERSKI, DERIC S
5727 BISCAYNE CT 309
NEW PORT RICHEY, FL 34652 US

DYMERSKI, DERIC S
4772 TUSCAN LOON DRIVE
TAMPA, FL 33619 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: 02/21/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Delete Title: P (X) Change ( ) Addition Name: DYMERSKI, DERIC S Name: DYMERSKI, DERIC S

Address: 5727 BISCAYNE CT 309
City-St-Zip: NEW PORT RICHEY, FL 34652 US
Address: 4772 TUSCAN LOON DRIVE
City-St-Zip: TAMPA, FL 33619 US

 $\label{eq:title: S,T} \mbox{Title:} \qquad \mbox{S,T} \qquad \mbox{( ) Delete} \qquad \qquad \mbox{Title:} \qquad \mbox{S,T} \qquad \mbox{(X) Change ( ) Addition}$ 

 Name:
 BURROUGHS, TAMARA J
 Name:
 BURROUGHS, TAMARA J

 Address:
 5727 BISCAYNE CT 309
 Address:
 4772 TUSCAN LOON DRIVE

 City-St-Zip:
 NEW PORT RICHEY, FL 34652
 City-St-Zip:
 TAMPA, FL 33619

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TAMARA BURROUGHS T 02/21/2008